

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
Mar 25 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **166755** (9)

1. Corporation Name

FLORIDA AVIATION FUELING COMPANY, INC.



Principal Place of Business

**MIAMI NATIONAL AIRPORT
4720 NW 20 STREET
MIAMI FL 33159**

Mailing Address

**P.O. BOX 99-6010
MIAMI FL 33299-6010**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

10/15/1951

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.
22 City & State	27 City & State
23 Zip	28 Country
24	25
29	30

4. FEI Number

59-0785228

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution

☐

**\$5.00 May Be
Added to Fees**

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

**CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324**

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	VPGM	<input type="checkbox"/> DELETE
NAME	TARMAN, ROBERT	
STREET ADDRESS	109 TAMERLANE	
CITY-ST-ZIP	PEACHTREE CITY GA	
TITLE	D	<input type="checkbox"/> DELETE
NAME	BOHANNEN, ROBERT	
STREET ADDRESS	6819 E HUMMINGBIRD LANE	
CITY-ST-ZIP	PARADISE VALLEY AZ	
TITLE	V	<input checked="" type="checkbox"/> DELETE
NAME	BLAUCH, MAURICE, W. II	
STREET ADDRESS	8240 NW 52ND TERR	
CITY-ST-ZIP	MIAMI FL 33166	
TITLE	V	<input type="checkbox"/> DELETE
NAME	STAUFFER, LLOYD M.	
STREET ADDRESS	8240 NW 52 TERR.	
CITY-ST-ZIP	MIAMI FL 33166	
TITLE	VT	<input type="checkbox"/> DELETE
NAME	NELSON, RONALD G.	
STREET ADDRESS	DIAL CORPORATE CENTER	
CITY-ST-ZIP	PHOENIX AZ	
TITLE	V	<input type="checkbox"/> DELETE
NAME	PETTIT JR., DAVID R.	
STREET ADDRESS	8240 NW 52ND TERR	
CITY-ST-ZIP	MIAMI FL	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
3.2 NAME	VICE PRESIDENT-MARKETING/SALES
3.3 STREET ADDRESS	JOHN W. GASSETT
3.4 CITY-ST-ZIP	8240 N.W. 52ND TERR.
	MIAMI, FL 33166
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

CR2E034 (10/97)